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7590

10/04/2004

Rohm and Haas Electronic Materials
 CMP Holdings, Inc.
 Suite 1300
 1105 North Market Street
 Wilmington, DE 19899

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BARBARA A. WILEY (Depositor's name)
 Barbara A. Wiley (Signature)
 12/10/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/660,250	09/11/2003	John V.H. Roberts	099U1D2	5343

TITLE OF INVENTION: POLISHING PADS AND METHODS RELATING THERETO

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370 \$ 1400	\$300	\$1670 \$ 1700	01/04/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
OJINI, EZIAMARA ANTHONY	3723	451-548000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. JOAN TAFT KLUGER
 2. BLAKE T. BIEDERMAN
 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROHM AND HAAS ELECTRONIC
 MATERIALS CMP HOLDINGS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

WILMINGTON, DE (US)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

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- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 500618 (enclose an extra copy of this form).

5. Change in Entity Status: (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

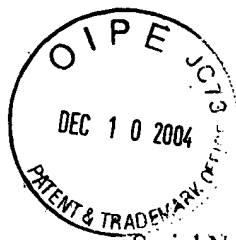
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Authorized Signature Blake T. BiedermanDate 12-9-04Typed or printed name Blake T. BiedermanRegistration No. 34,124

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial Number: 10/660,250Confirmation Number: 5343Title: POLISHING PADS AND METHODS RELATING THERETOAttorney Docket Number: 099U1D2

ISSUE FEE TRANSMITTAL LETTER

Mail Stop Issue Fee
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Dear Sir:

Enclosed are the following:

1. X Issue Fee Transmittal (PTOL-85B).
2. X Authorization to charge the required fees, or credit any overpayment, to Deposit Account No. 500618.

12-10-04
Date

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302-366-0500

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